

# MUNICIPAL CLERK'S OPEN RECORDS REQUEST

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

**Specific records requested:**

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Request received by: \_\_\_\_\_

Request processed by: \_\_\_\_\_

Date available for pick up: \_\_\_\_\_

Date given to requestor: \_\_\_\_\_

Cost: \_\_\_\_\_

Paid: \_\_\_\_\_

**Richarda Duffy Momsen, City Clerk**  
**300 N. Campbell, 1<sup>st</sup> Floor**  
**El Paso, TX 79901**  
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**Fax: (915) 541-4306**  
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